

# CLAIMS ONLY

SERIAL NO.

FILING DATE

APPLICANT(S)

## CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	/					
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47						
48						
49						
50	/					
TOTAL IND.		↓		↓		↓
TOTAL DEP.		↙		↙		↙
TOTAL CLAIMS						

	*		*		*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
51	/					
52		/				
53		/				
54		/				
55		/				
56	/					
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99						
100						
TOTAL IND.	8	↓		↓		↓
TOTAL DEP.	49	↙		↙		↙
TOTAL CLAIMS	57					

\* MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS